

Work Variance Form

Request To Utilize Current Employer for Internship Credit

Date _____

Student Name: _____ Student ID: _____ Student Major: _____

Current Position _____ Salary _____ Hours Per Week _____

Dates of Employment _____

Employer _____

Employer Address: _____

Employer Telephone No.: _____

Semester for Internship: Fall _____ Spring _____ Summer _____
Year Year Year

Required Materials: Please submit the following to the Internship Coordinator. Please allow 3-5 business days for a response to your request.

1.	The "Request to Utilize Current Employer For Internship Credit" Form (Work Variance Form).
2.	A letter, from student, requesting approval and briefly describing the project and tasks that are different from the student's employment.
3.	A current job description.
4.	A letter from the current supervisor which clearly states that the student's internship requirements will be allowed by the employer.
5.	Internship application from the Internship Packet of Information.

Action Taken by Reviewers (check one):

Approved Denied Decision Delayed Pending Further Information

Assistant Director, Undergraduate Advising Date

Approved Denied Decision Delayed Pending Further Information

Internship Coordinator Date